

## MAY 11, 2006

## HEALTH ALERT NETWORK HEALTH UPDATE

As of May 8, 2006, Iowa had reported 1,609 confirmed, probable and suspect cases of mumps. Many other states, including South Dakota and Minnesota also have reported an increased number of cases. North Dakota has had three confirmed cases of mumps reported in 2006. The cases were reported from Mountrail, Rolette and Dickey Counties. None of the reported cases have been epidemiologically linked to Iowa. For more information about North Dakota mumps cases, visit <a href="www.health.state.nd.us/disease/Immunization/Mumps/MumpsInfo.htm">www.health.state.nd.us/disease/Immunization/Mumps/MumpsInfo.htm</a>. The website will be updated weekly.

The clinical case definition for mumps is an illness with acute onset of unilateral or bilateral tender, self-limited swelling of the parotid or other salivary gland lasting two or more days and without other apparent cause. Mumps should not be ruled out in someone who has symptoms clinically consistent with the disease based solely on the person having a MMR vaccination history. The vaccine is not effective in 10 to 20 percent of people, so infection is still possible even if vaccinated.

Health-care providers suspecting mumps should collect specimens for both serologic testing <u>and</u> viral culture. The Centers for Disease Control and Prevention (CDC) has found that serum IgM may be negative in up to 50 percent to 60 percent of acute serum samples among people who have been previously vaccinated. **Mumps should not be ruled out solely on the basis of a negative IgM if the person has a history of mumps vaccination.** 

The North Dakota Department of Health (NDDoH) is requesting that providers notify the NDDoH at 701.328.2378 or toll-free at 800.472.2180 immediately of all probable mumps cases, regardless if laboratory results are available or not. Providers should advise probable cases to exclude themselves from public activities until nine days after the onset of parotitis.

The NDDoH will be investigating all probable and confirmed cases.

- A probable mumps case is a person who meets the clinical case definition and
  - o Has no serologic or virologic testing; or
  - o Was vaccinated and has a negative IgM; or
  - o Is not epidemiologically-linked to a confirmed or probable case
- A confirmed mumps case is a person who meets the clinical case definition and is epidemiologically linked to a confirmed or probable case. A laboratory-confirmed case does not need to meet the clinical case definition.
  - o The NDDoH will not investigate asymptomatic laboratory-confirmed mumps cases.

Vaccination is the best way to prevent mumps infection. Two doses of measles, mumps and rubella (MMR) vaccine are recommended for all children. The first dose of MMR vaccine typically is given at 12 to 15 months of age, and the second dose at 4 to 6 years of age. Children attending day cares in North Dakota are required to be age-appropriately immunized against

mumps. Two doses of MMR are required for all children attending schools or colleges in North Dakota. Parents are encouraged to check their child's immunization record or contact their child's health-care provider or local public health unit to ensure their child's vaccinations are upto-date. At this time, there is no recommendation to change the immunization schedule. Any changes to the immunization schedule will be based on the epidemiology of reported cases.

Adults born before 1957 are considered immune to mumps. Adults born in and after 1957 should be vaccinated with at least one dose of mumps-containing vaccine.

According to the CDC, preventing transmission of mumps in health-care settings consists of four major components: (1) assessment of evidence of immunity of health-care workers, including documentation of clinical disease, laboratory evidence, birth before 1957 or appropriate vaccination history; (2) vaccination of those without evidence of immunity; (3) exclusion of health-care workers with active mumps illness as well as non-immune health-care workers who are exposed to confirmed, probable or suspected mumps patients; and (4) isolation of patients in whom mumps is suspected.

Although birth before 1957 is usually considered proof of immunity, during an outbreak, birth before 1957 by itself should not be used as evidence of immunity in health-care workers. During an outbreak, health-care workers born before 1957 should be asked for documentation of clinical disease or immunity. Those without such documentation should be vaccinated. North Dakota is currently not considered to be in an outbreak situation.

| For more information about mumps,     | contact the NDDoH Division of Disease Control at |
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| 701.328.2378 or toll-free at 800.472. | 2180.  |

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Categories of Health Alert messages:

- Health Alert conveys the highest level of importance; warrants immediate action or attention.
- <u>Health Advisory</u> provides important information for a specific incident or situation; may not require immediate action.
- <u>Health Update</u> provides updated information regarding an incident or situation; no immediate action necessary.
- <u>Health Information</u> provides general information that is not necessarily considered to be of an emergent nature.

This message is being sent to local public health units, clinics, hospitals, physicians, tribal health, North Dakota Nurses Association, North Dakota Long Term Care Association, North Dakota Healthcare Association, North Dakota Medical Association, North Dakota EMS Association and hospital public information officers.